## PEER REVIEW HISTORY

BMJ Open publishes all reviews undertaken for accepted manuscripts. Reviewers are asked to complete a checklist review form (http://bmjopen.bmj.com/site/about/resources/checklist.pdf) and are provided with free text boxes to elaborate on their assessment. These free text comments are reproduced below.

## **ARTICLE DETAILS**

TITLE (PROVISIONAL)	"Putting salt on the wound": A qualitative study of the impact of
	FGM-safeguarding in healthcare settings on people with a British
	Somali heritage living in Bristol, UK.
AUTHORS	Karlsen, Saffron; Carver, Natasha; Mogilnicka, Magda; Pantazis,
	Christina

## **VERSION 1 - REVIEW**

REVIEWER	Brian D. Earp
	Yale-Hastings Program in Ethics and Health Policy, Yale University
	and The Hastings Center, USA
REVIEW RETURNED	19-Dec-2019
OFNEDAL COMMENTO	T
GENERAL COMMENTS	The authors have fully addressed my earlier comments. I look
	forward to the publication of this important article and will be citing it
	in future work.
REVIEWER	Lina Roa
	Department of Obstetrics & Gynecology, University of Alberta,

	Department of Obstetrics & Gynecology, University of Alberta,
	Canada
REVIEW RETURNED	21-Dec-2019

OFNIED AL COMMENIES	
GENERAL COMMENTS	This is a well written study of an important topic and I admire that this was the result of a request from the public and that the study had significant public involvement. A few suggestions to strengthen the manuscript are:
	-The methods say "we ensured that we also recruited individuals who might not be so strongly motivated to report negative experiences" but there is no explanation of how this was done. It would be useful to know the approach used by the researchers for future studies as I would assume it is challenging to identify these participants and recruit them.
	-Snowball sampling is mentioned but there is no mention of how the sample size was determined. Was thematic saturation reached? Was saturation found in the individual group (male, female, young, etc)? Or was saturation reached overall? Was this the maximum of people that could be recruited?

- I would appreciate some explanation of whether the authors think these findings are applicable to other heritage groups. Similarly, do the authors think the findings are applicable outside of Bristol? Even though there is likely not a definite answer, this discussion would be welcome.
-The pages listed in the reporting checklist for qualitative studies don't match the manuscript pages so it is hard to follow the checklist.

## **VERSION 1 – AUTHOR RESPONSE**

Reviewers' Reports:

1. Reviewer 1 Name: Brian D. Earp

The authors have fully addressed my earlier comments. I look forward to the publication of this important article and will be citing it in future work.

Reviewer 2 Name: Lina Roa

This is a well written study of an important topic and I admire that this was the result of a request from the public and that the study had significant public involvement. A few suggestions to strengthen the manuscript are:

a. The methods say "we ensured that we also recruited individuals who might not be so strongly motivated to report negative experiences" but there is no explanation of how this was done. It would be useful to know the approach used by the researchers for future studies as I would assume it is challenging to identify these participants and recruit them.

This varied recruitment was achieved through engaging with organisations with a range of associations with FGM-safeguarding practice. This involved some which were motivated by a concern about these practices – including those who initially approached the research team – and others which have historically had more involvement in FGM-safeguarding policy development in the city, and might therefore view these policies and practices in a more positive light. We have endeavoured to provide further information regarding these recruitment approaches on page 6, whilst being mindful of the risks associated with this for disclosing the particular organisations involved. This has understandably limited the amount of additional information we could provide.

b. Snowball sampling is mentioned but there is no mention of how the sample size was determined. Was thematic saturation reached? Was saturation found in the individual group (male, female, young, etc)? Or was saturation reached overall? Was this the maximum of people that could be recruited?

This was the maximum number of people that could be recruited within the timeframe of the project.

c. I would appreciate some explanation of whether the authors think these findings are applicable to other heritage groups. Similarly, do the authors think the findings are applicable outside of Bristol? Even though there is likely not a definite answer, this discussion would be welcome.

This is the first study to explore experiences of FGM-safeguarding among FGM-affected groups living in the UK. However, anecdotal evidence suggests that these findings may be applicable across the UK. Research from other European countries (such as Johnsdotter 2019 – reference 39 in the manuscript), suggests that this is not limited to the UK. However, further research is needed to establish whether these findings are applicable to other heritage groups.

Research evidence regarding the low levels of support for FGM among migrant groups, in the UK, elsewhere in Europe and in other countries, such as the US and Australia, is more established. This research is documented in references 16-36 in the manuscript.

d. The pages listed in the reporting checklist for qualitative studies don't match the manuscript pages so it is hard to follow the checklist.

This checklist was completed for the earlier version of the manuscript and was not updated in light of later amendments. This has now been corrected.